

## Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

Establishment Name	Telephone Number	Date of Ins (mm/dd/y)		PERMIT#
A Nice Restaurant	8/2-923-7770	(11111111111111111111111111111111111111	,	19-
Establishment Address (number and street, city, state, zip code)	<b>-</b>	11-30	)-20	'_
Establishment Address (number and street, city, state, zip code) 404 Lafollette Station Floyds Krobs W 4749  Owner				03
Owner	Purpose:	Follow-u	n Releas	se Date
Bobbie Wills	1. Routine	1/0	10	
	1			
404 Latollette Station	2. Follow-up	Summary	of Violation	ns:
	3. Complaint	034		~/
Person in Charge Lay Washington	4. Pre-Operational	$ C\rangle$	NC	$\mathbb{Z}_{\mathbb{R}} \emptyset$
	5. Temporary			
Responsible Person's E-mail	1 ' '	Menu Typ	ne (See back	of page)
	6. HACCP	1		_
Certified Food Manager	7. Other (list)	12	3 V	_4 <u>,</u> _5
Certified Food Manager Bobbic Wills 7-17-22	<del></del>			:
CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS	MARKED "C"	•		
* CRITICAL ILEMS ARE IDENTIFIED IN THE CHECKLIST AND MARKALLYE COLUMNS MARKED "C"				
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SU	MMARY OF VIOLATIONS" A	ND IN THE N	ARRATIVE	BELOW AS "R"
Section# C/NC R Narrative			To Be Co	orrected By
291 NC Observed no Quat-10 need for testing Sani-6	test strips		3 d	avc
400d £ / 0/ 5 4 / 6	1. K.J.C. (J.1)	ر ۲		<del></del>
need for testing sani-b	UCKE MI. LTAGIET	2)		<del></del>
- Quat tablets are not ne	eded in dishi	vachind		
0.0000 10 12/00 004 0	1			
- Quat tablets are not needed in dishwashing process if dishes are going through dish machine.				
dish machine.				
			-	
	<del> </del>			
note: Check cutting board & Air vents new Kitchen entrance.				
Dean Kitchen antonice.				
new Alforder grafforder				
				<u>.</u>
	<del></del>			
Received by (name and title printed):	Inspected by (name and title	printed):		
1.100011 51 1000	Thomas	Snider	FH	IS :
Diddicion of war on a grant		-11061	, — 11	
Received by (signature):	Inspected by (signature);	0 -	1	
Town I & MAS M	Horm-6	Kond	<u>ر</u>	
cc; cc:		cc:		